

**CAL/OSHA
CONSULTATION SERVICE**

GOLDEN STATE RECOGNITION

**APPLICATION
and
INFORMATION PACKET**

April 4, 2005

**For information on this or any of the
Cal/OSHA Recognition and Exemption Programs contact the Cal/OSHA
Consultation Service Employer Assistance Office closest to you.**

A PARTNERSHIP WITH CAL/OSHA

It is the policy of the Division of Occupational Safety and Health to provide opportunities for entire industries and individual establishments to work as partners with labor and Cal/OSHA in implementing and maintaining high standards of workplace safety and health management. The resulting partnership offers several levels of recognition to qualified companies and their employees:

- Voluntary Protection Program (VPP) and Golden State: The leadership recognition levels for companies that have highly effective safety and health management systems.
- Cal/SHARP and Cal/SHARP – Construction: (Safety and Health Achievement Recognition Program) - For high-hazard companies that are maintaining advanced safety and health management systems.
- Golden Gate: For high-hazard companies that are maintaining effective safety and health management systems.

GOLDEN STATE BENEFITS

Eligible employers will:

- Be recognized by Cal/OSHA as a Golden State participant at all their California non-fixed worksites where their employees are working. Golden State contractors that have overall worker safety and health responsibility for a non-fixed worksite will have that site(s) removed from Cal/OSHA's programmed inspection list during their participation in the Golden State program or until such time as the Golden State employer no longer has overall worker safety and health responsibility for the site.
- Receive letters in lieu of Cal/OSHA complaint inspections whenever the option is statutorily available.
- Have Cal/OSHA complaint and accident inspections limited to a specific area, and receive automatic maximum "Good Faith" credit to any proposed civil penalties resulting from a Cal/OSHA inspection.
- Receive statewide recognition from their industry and government as a quality employer. Indirect benefits may include increased job referrals and bid acceptance.
- Develop a partnership with labor and Cal/OSHA through the self-policing and maintenance of safety and health programs.

ABOUT THE GOLDEN STATE PROGRAM

- The Golden State Program is designed specifically for employers with non-fixed worksites. Companies who meet the requirements of this program receive statewide recognition. Golden State companies that have overall worker safety and health responsibility at non-fixed worksites in California will have that site exempted from Cal/OSHA programmed inspections. Golden State companies are considered to be workplace safety and health leaders within their industry. A California worksite under the control of a Golden State employer is recognized as a worksite expected to have a significantly lower risk for serious accidents than other employer's worksites within the same industry. In turn, this allows Cal/OSHA to focus its programmed inspection efforts on other worksites.
- Golden State employers must demonstrate that they have management commitment to and employee involvement in their safety and health management system. The company must also demonstrate that they are maintaining their safety and health management system at all their construction worksites in California, and that their systems are effective in reducing accidents at the sites.

- The Golden State application and approval process is managed through the Cal/OSHA Consultation Service's on-site visit process. Like all the Cal/OSHA partnership programs, the Golden State Program is designed to ensure employer success. The Cal/OSHA Consultation Service can assist the employer until such time that the employer becomes qualified to participate.
- Golden State approval is processed in four phases:
 - Phase 1 The written application that is intended to provide basic employer information and safety and health performance data about the employer.
 - Phase 2 Consists of a meeting(s) to discuss the safety and health management systems and policies, and to review safety and health documentation.
 - Phase 3 Consists of random on-site evaluations performed by the Cal/OSHA Consultation Service Area Offices and correction of any identified hazardous conditions.
 - Phase 4 The final phase, is a declaration by the employer and Cal/OSHA approval of Golden State participation.
- When achieved, the Golden State Program status will be granted to the company and all its California employees, and will be applicable for a period of three years at all of the company's California non-fixed worksites. A programmed inspection exemption may be granted to all California worksites where the Golden State employer has overall safety and health responsibility for the entire site, including all other employers and their employees at the site.

QUALIFICATIONS

Your company may be considered for Golden State recognition if it meets the following qualifications:

1. Requests and receives a Golden State evaluation by the Cal/OSHA Consultation Service or all your worksites in California are currently participating in Cal/SHARP and/or Cal/SHARP - Construction.
2. Your company meets the definition of Cal/OSHA Consultation Service's high hazard employer. High hazard employers are defined as:
 - a. Being in an industry identified in the Division's strategic and annual plans;
 - b. An establishment with a current experience modification rating of 125% or greater;
 - c. Being in an industry identified by the Division as being a high hazardous nature by virtue of the industry's LWDI; or
 - d. An establishment with a SIC/NAIC coding listed that is considered a high hazard nature workplace by the Cal/OSHA Consultation Service.
3. Your company has had no final order willful, repeat, or willful-repeat citations at any worksite within twenty-four (24) months prior to the date of the Golden State opening conference, and no serious citations related to a serious injury or exposure at the worksite to be evaluated within twelve (12) months prior to the date of the Golden State opening conference.

NOTE: Golden State participation will not be determined until after any and all citations are final order.

4. Have established and maintained a highly effective injury and illness prevention program as a basis for your safety and health management system. The sample review elements found in this Information Packet may be used for self-assessment of your injury and illness prevention program; and

5. Demonstrate a lower than average number of injuries and illnesses over the previous four (if applicable) full calendar years. Successful applicants should meet or exceed at least two of the following ratings:

- (i) Experience Modification Rating at or below 90%;
- (ii) Average Lost Work Day Injury and Illness (LWDII) incident rating at or below 90% of the most recent California industry average; or
- (iii) Total Injury and Illness (TII) Rate at or below 90% of the most recent California industry average;
- (iv) Average Days Away, Restricted, Transferred (DART) incident rating at or below 90% of the most recent California industry average; or
- (v) Total Recordable Case (TRC) rate at or below 90% of the most recent California industry average.

THE GOLDEN STATE PROCESS

HOW TO APPLY

Golden State applications can be provided to you at any of the Cal/OSHA Consultation Service's Employer Assistance Offices listed on the last page of this document. Applications should be sent to the Cal/OSHA Consultation Service's Employer Assistance Office servicing the California headquarters for your company - See page sixteen (16) of this application for a list of contacts and phone numbers. Following the application review, a representative from the Employer Assistance Office will contact your company to start the evaluation process. A sample application is attached. The following documentation should accompany your application in order to ensure a quick approval:

- A copy of your company's Injury and Illness Prevention Program. Sufficient documentation must be supplied covering all essential elements of the injury and illness prevention program, the implementation and enforcement strategies, and any documentation that supports the effectiveness of the program at all of your company's work sites.
- If applicable, explanations for high ex-mods and injury and illness data.
- A list containing all union signatories and contacts, if applicable.
- A copy of the contract language used to contract with sub-contractors.
- A signed statement of commitment and understanding from the company Owner/CEO.

If the application information received is incomplete or insufficient to determine eligibility, then the applicant will be contacted by the Area Office and given ninety (90) days to present additional information supporting your company's eligibility.

You do not need to use the attached application form. Your application may be in any format convenient for you. However, it should address each item listed in the sample application. Where existing policies, guidelines, forms, descriptions, etc. are requested you are encouraged to enclose copies rather than re-writing the information for this application. Included with this application is a Golden State Program - Documentation List. Information on this list should be provided to the Cal/OSHA Consultation Service during Phase 1 to speed up the application process. The optional documentation does not need to be provided unless specifically requested by the Employer Assistance Office.

THE SAFETY AND HEALTH CONFERENCE

Following acceptance of your company's application, the Cal/OSHA Consultation Service Golden State representative will arrange to meet with company representatives to discuss the company's safety and health program management systems. Union signatory business representatives must be invited to participate in this conference. Union representatives are encouraged to participate in the entire visit. However, the amount of participation is up to the union representatives.

The purpose of this meeting is for company representatives to explain to the Cal/OSHA Consultation Service representative how the company's safety and health programs are designed to protect workers from preventable injuries and illnesses. Discussions should include all processes, rules, and procedures that demonstrate how your company upholds worksite safety and health responsibilities in a multi-employer environment.

Attached are sample review elements that the company representatives should be prepared to discuss during Phase 2, and demonstrate during Phase 3. The sample review elements may be used to perform self-evaluations and will help you determine how ready your company is for this program.

Following the conference the Cal/OSHA Consultation Service's representative will let you know whether your company is ready for the next phase of this application. If the Cal/OSHA Consultation Service has determined that your company is not ready for the worksite evaluation phase, then your company will have up to one year to improve your safety and health program. Your company's written application will be kept on file during that time period. However, you may be asked to update some of the injury and illness performance data, and additional on-site visits may be necessary.

WORKSITE EVALUATIONS

After a successful meeting regarding your company's safety and health management system, the Cal/OSHA Consultation Service's representative may plan worksite evaluations depending on how many of your worksites are already participating in Cal/SHARP and Cal/SHARP – Construction. The Cal/OSHA Consultation Service's representative will work with company representatives in deciding how many and which sites to visit. Depending on the results of the initial on-site evaluations, the Cal/OSHA Consultation Service representative may want to visit additional sites. Union signatory business representatives must be invited to participate in the worksite evaluations. However, the amount of participation is up to the union representatives.

The worksite evaluations will be performed by a Cal/OSHA Consultation Service's representative and may result in identification of hazardous conditions that must be corrected before recognition can be granted. Non-compliance findings by Cal/OSHA Consultation will not be subject to citations or penalties. However, Cal/OSHA Enforcement will be notified if the company fails to take appropriate action to abate serious hazards. The Cal/OSHA Consultation Service representative will explain the worksite evaluation process and the company's rights and responsibilities before visiting the company worksite(s). The worksite evaluation by Cal/OSHA Consultation Service's representative will include, but not be limited to:

- Validating the effectiveness of your company's safety and health program management systems;
- Evaluating your overall control of safety and health at the site;
- Worker/Contractor interviews; and
- Observation of safe work practices.

FINAL APPROVAL

If the Cal/OSHA Consultation Service representative concludes that improvement or correction is needed in one or more areas before recommending Golden State status, then arrangements will be made to assist your company in improving those areas. Improvement must be accomplished within the time period arranged by the Cal/OSHA Consultation Service's representative. The Cal/OSHA Consultation Service will continue to work with your company to accomplish the needed improvements.

Upon satisfactory completion of Phases 1-3, the company must certify that the safety and health management systems verified by the Cal/OSHA Consultation Service's representative will be maintained at all worksites in California where the company has overall worker safety and health responsibility. Attached is a certification form that must be completed and returned to the Area Office servicing your application. Also, a current list of your company safety representative contacts for all worksites in California must be sent to the Cal/OSHA Consultation Service representative. This list must be kept updated.

The approval is for three years. During this three-year approval period the Cal/OSHA Consultation Service may arrange for random on-site visits by the Cal/OSHA Consultation Service's Area Office to verify continued Golden State eligibility.

Once approved, evaluations by the Cal/OSHA Consultation Service will take place:

- Randomly throughout the approval period if there is a question about the general contractors workplace safety and health program maintenance or eligibility;
- At the end of the certification period if the general contractor is reapplying; and
- Within six months upon notification of change of ownership.

Also, your company will be responsible for providing the Cal/OSHA Consultation Service with an annual report updating any changes to the safety management systems. The Cal/OSHA Consultation Service's representative should be notified immediately whenever:

- A Cal/OSHA Enforcement inspection takes place at one of your Golden State worksites;
- Any citations are received by the enforcement unit of the Division;
- Any Willful, Repeat or Serious accident-related or exposure-related citations are received from other states or federal OSHA enforcement programs;
- Requests are made for temporary or permanent variances;
- There are significant changes in safety and health management systems; and
- There are changes in top management or corporate structures that may impact the safety and health systems.

RENEWALS

Golden State participation is for three years. However, once approved, the company may remain in Golden State indefinitely through renewals, contingent upon the outcome of periodic evaluations. Golden State participation may also be terminated if minimum requirements are not maintained at each site.

EMPLOYER OBLIGATIONS

After receiving Golden State status your company must maintain your Golden State qualifications and the same high standard of safety and health at all company worksites in California. A Golden State company may be asked to voluntarily withdraw from the program if any of the following requirements are not maintained:

- The Cal/OSHA Consultation Service is not informed of Cal/OSHA enforcement actions at a Golden State company worksite;
- A final order Willful Citation is received from the Division of Occupational Safety and Health at any Golden State company worksite;
- A final order Serious Citation is received from the Division of Occupational Safety and Health related to a fatality of a worker at any Golden State company worksite;
- A final order Serious Citation is received from the Division of Occupational Safety and Health related to a catastrophic event (serious injury or exposure to three or more people) that occurred to workers at any Golden State company worksite;
- The Golden State company receives two unsatisfactory evaluations within a one-year period following approval to participate in the program;
- Loss of any applicable California licensing and permits;
- A Golden State company worksite refuses to allow Division of Occupational Safety and Health authorized enforcement or consultation personnel access to any of their sites;
- There is a change of ownership or corporate structure to the Golden State company and the Division of Occupational Safety and Health is not notified in writing within 30 calendar days of the changes; and,
- If Golden State company safety and health management system standards as demonstrated during the evaluation period are not maintained at each California worksite where the company has overall worker safety and health responsibility.
- Voluntarily withdraw from Golden State participation if any of the above obligations are not met during the recognition and exemption period.

FOR MORE INFORMATION

For more information on this and other Cal/OSHA partnership programs, contact the nearest local Cal/OSHA Consultation Service Employer Assistance office. Office locations and telephone numbers are listed on the last page of this document.

GOLDEN STATE APPLICATION - Page 1 of 3

I. COMPANY INFORMATION

Corporate Name _____

Company Name _____
(If different from Corporate; d.b.a.)

Mailing Address _____

Type of Work
Performed _____

Primary Standard Industry Classification (SIC/NAIC) Code: _____

Secondary SIC/NAIC Code(s): _____

II. COMPANY REPRESENTATIVE

Name _____

Title _____

Address _____
(If different than above)

Telephone _____ Fax _____

E-Mail Address _____

Alternate Contact _____

Telephone _____

GOLDEN STATE APPLICATION - Page 2 of 3

III. INJURY AND ILLNESS PREVENTION PROGRAM
(Attach a copy to this application)

IV. PERFORMANCE MEASURES FOR PREVIOUS FOUR FULL CALENDAR YEARS
(Or for as many years as you have data. Also, attach supporting documentation.)

Calendar Year	_____	_____	_____	_____
Hours per Year	_____	_____	_____	_____
Number Employees	_____	_____	_____	_____
Exper.Mod. Rate (If rated)	_____	_____	_____	_____
L.W.D.I. Rate	_____	_____	_____	_____
Injury & Illness Rate	_____	_____	_____	_____

V. EXPLANATION OF HIGH RATES AND/OR OTHER SUPPORTING DATA (If applicable)
(Attach additional pages if necessary)

GOLDEN STATE APPLICATION - Page 3 of 3

VI. UNION SIGNATORIES (If applicable)

Union

Business Representative (Name & Phone)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

VII. STATEMENT OF COMMITMENT AND UNDERSTANDING

(Owner/CEO to sign statement below or attach a letter in your own words with the same assurances.)

I understand the company's safety and health obligations while applying for and participating in the Golden State program. I also understand that the company may withdraw its participation at any time or for any reason should we so desire.

In applying for the Golden State program I agree to make all requested occupational safety and health information available to Cal/OSHA upon request and to allow the Consultation Service to make visits to any of our sites in California.

Signature: _____
(Owner or CEO of applicant company)

Date: _____

DOCUMENTATION LIST

If not already provided, the following documentation should be included with your injury and illness prevention program:

- Description of the training process.
- Description of the self-inspection process.
- Accident and near-miss investigation process.
- Safety or health problem/complaint reporting and tracking system.
- Equipment maintenance schedule.
- Specific safety and health programs (Hot Work, fall protection, forklift, electrical, hoists, PPE, hazard communication, lead, asbestos, etc.).
- Process for ensuring that safety and health rules and emergency procedures are complied with.
- Evidence of line accountability (management evaluations, reward and penalty systems, budget, disciplinary system, etc.).
- Pre-job task analysis procedure.
- Subcontractor program; systems and procedures to ensure subcontract work is performed safely.
- Medical/first-aid program.
- If applicable, copies of all information required under the Process Safety Management Standard, including project reviews or analysis, which examine possible failure, points.
- Updated safety organization chart.

The documentation listed below is optional unless specifically requested by the Cal/OSHA Consultation Service:

- OSHA Logs
- First Aid Logs
- Workers' Compensation First Report of Injury (or OSHA 101) for the past four years.
- Workers' Compensation Loss Runs

SAMPLE REVIEW ELEMENTS #1

Program Elements	Effective	Action Item
Are organizational safety and health policies clearly established in writing, address anticipated hazards, and periodically evaluated and updated as necessary?		
Is there a person or persons clearly identified with sufficient authority and responsibility for implementing the safety and health program and, are the employees aware of who the person or persons are that have the authority and responsibility for their safety and health program and can they can communicate with them if necessary?		
Is there an effective process in place that involves all employees in safety and health? Examples may include an evaluation of the pre-job and pre-task planning processes, meetings with management and subcontractors, and site specific safety training, posting, written communications, anonymous notification by employees, and safety and health committees.		
Does each project have a worker recognition program that is designed to prevent injuries and illnesses?		
Is top management involved in the safety and health reporting process?		
Does top management consider safety and health to be a line rather than a staff function?		
Are all applicable mandated programs effective and in place? A mandated program is defined as a set of managerial and operational requirements directed toward a specific safety and/or health objective, for example: designation of responsible persons, hazard controls, record keeping, and employee training.		
Is the safety and health representative reporting structure effective?		
Are supervisors evaluated on their safety and health performance?		
Does an effective hazard reporting system exist and do employees actually use this system to report hazards? This system should encourage employees to inform the employer of hazards at worksites without fear of reprisal.		
Are positive and negative incentive plans in place to encourage employees to comply with safe and healthful work practices? Positive incentive plans should encourage the use of safe work practices that prevent of accidents and the following of safety and health rules. Negative incentives would include disciplinary action when rules are not complied with.		
Are employees actively involved in watching for hazardous situations? Actively involved refers to employees and management constantly observing and assessing workplace hazard controls and work practices while they perform their job and then following procedures to ensure failures are corrected.		
Does the project have a written site-specific safety and health program?		
Are pre-job safety and health meetings held?		
Are toolbox safety and health meetings held at least weekly?		

SAMPLE REVIEW ELEMENTS #2

Program Elements	Effective	Action Item
Are home office inspections performed often enough to be effective?		
Are procedures in place for identifying and evaluating workplace hazards? Procedures should include periodic scheduled inspections. Procedures should includes inspections whenever new substances, processes procedures or equipment are introduced into the workplace that represent a new hazard, and whenever a new or previously unrecognized hazards is identified.		
Are accidents, near misses, and incidents, including harmful substance exposures, investigated for root causes? The result of the investigation should establish actions that will prevent the recurrence. There should be some form of management/supervisory involvement in the investigations such as review and feedback.		
Is there an effective procedure for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner, and is the process based on the severity of the hazard?		
Do employees actively participate in hazard prevention and control, especially when an imminent hazard exists?		
Is housekeeping properly maintained?		
Are critical pieces of equipment routinely inspected and properly maintained?		
Is safety and health training a budgeted item?		
Does every worker on-site receive structured safety and health orientation?		
Do all employees and supervisors receive appropriate safety and health training, including safety and health program policies and rules, safety and health communication processes, and emergency procedures? The training must include all new employees, employees with new job assignments, and whenever there is introduction of new substances, processes, procedures or equipment to the worksite that represent a new hazard, and new or previously unrecognized hazards.		
Do supervisors and managers receive training that covers the supervisory aspects of their safety and health responsibilities?		
Are subcontractors required to submit written site-specific safety plans?		
Do subcontractors hold safety and health meetings at least weekly?		
Do all subcontractors understand their responsibilities at a multi-employer worksite?		
Are there effective sanctions for subcontractor non-compliance with safety and health rules and standards?		

COMPANY DECLARATION

(Owner/CEO to sign statement below or attach a letter in your own words with the same assurances.)

Our company is committed to doing its best to provide the highest level of safety and health protection to all workers at all of our construction sites throughout California. Therefore, I certify that the safety and health management systems verified by Cal/OSHA will be maintained at all sites in California where we are the employer responsible for worker safety and health.

During our participation as a Golden State employer, I will ensure that the Cal/OSHA Consultation Service is provided with a current list of all our safety representatives, their contact information, and their responsibilities. I will also ensure that the Cal/OSHA Consultation Service will be notified whenever there is a change to the information on the list.

Signature: _____
(Owner or CEO of applicant company)

Date: _____

CONTACT INFORMATION

Cal/OSHA Consultation Service

Dave Bare, Program Manager
2424 Arden Way, Suite 485
Sacramento, CA 95825
(916) 263-5765

Internet Address: www.dir.ca.gov
E-Mail Address: infocons@hq.dir.ca.gov
Toll Free Number: 800-963-9424

Cal/OSHA Consultation Service's EMPLOYER ASSISTANCE PROGRAM

Michael Alvarez, Statewide Manager
2424 Arden Way, Suite 485
Sacramento, CA 95825
(916) 263-5750

Sacramento - Northern California
Dave Strickler, Manager
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Sacramento 95825
(916) 263-0704

Santa Fe Springs – Los Angeles, Orange
Herman Jett, Manager
10350 Heritage Park Dr., Suite 201
Santa Fe Springs 90670
(562) 944-9366

Oakland - San Francisco Bay Area
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Oakland 94612
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San Bernardino 92401
(909) 383-4567

Fresno - Central Valley
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(559) 454-1295

San Diego - Imperial and San Diego
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San Fernando Valley - Santa Barbara, San Fernando Valley
Dan Leiner, Manager
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(818) 901-5754

Cal/OSHA Consultation Service's RESEARCH AND EDUCATION UNIT

Mario Feletto, Manager
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(916) 574-2528

Cal/OSHA Consultation Service's VOLUNTARY PROTECTION PROGRAM

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Cal/OSHA Consultation Service's HIGH HAZARD CONSULTATION PROGRAM

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Cal/OSHA Consultation Service's GOLDEN GATE-CAL/SHARP-GOLDEN STATE PROGRAMS

[Contact the nearest Employer Assistance Office]